

ISSUE SLIP STAPLE (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ABW	75331	
O.I.P.E. CLASSIFIER			5-11-5-99
FORMALITY REVIEW	DMK	69169	11-18-99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	7/10/22/6/23/2/24/
1	✓
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12	
13	✓
14	N
15	N
16	N
17	N
18	N
19	N
20	N
21	✓
22	✓
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40	✓
41	N
42	N
43	N
44	N
45	N
46	N
47	N
48	N
49	N
50	÷

Claim	Date
Final Original	7/10/22/6/23/2/24/
51	÷
52	N
53	N
54	✓
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62	
63	
64	
65	
66	✓
67	N
68	N
69	N
70	N
71	N
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Claim	Date
Final Original	
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If more than 150 claims or 10 actions  
staple additional sheet here